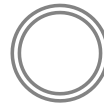


Money Follows Persons Rebalancing Initiative: California Community Transitions



CALIFORNIA OLMSTEAD ADVISORY COMMITTEE MEETING

AUGUST 14, 2013



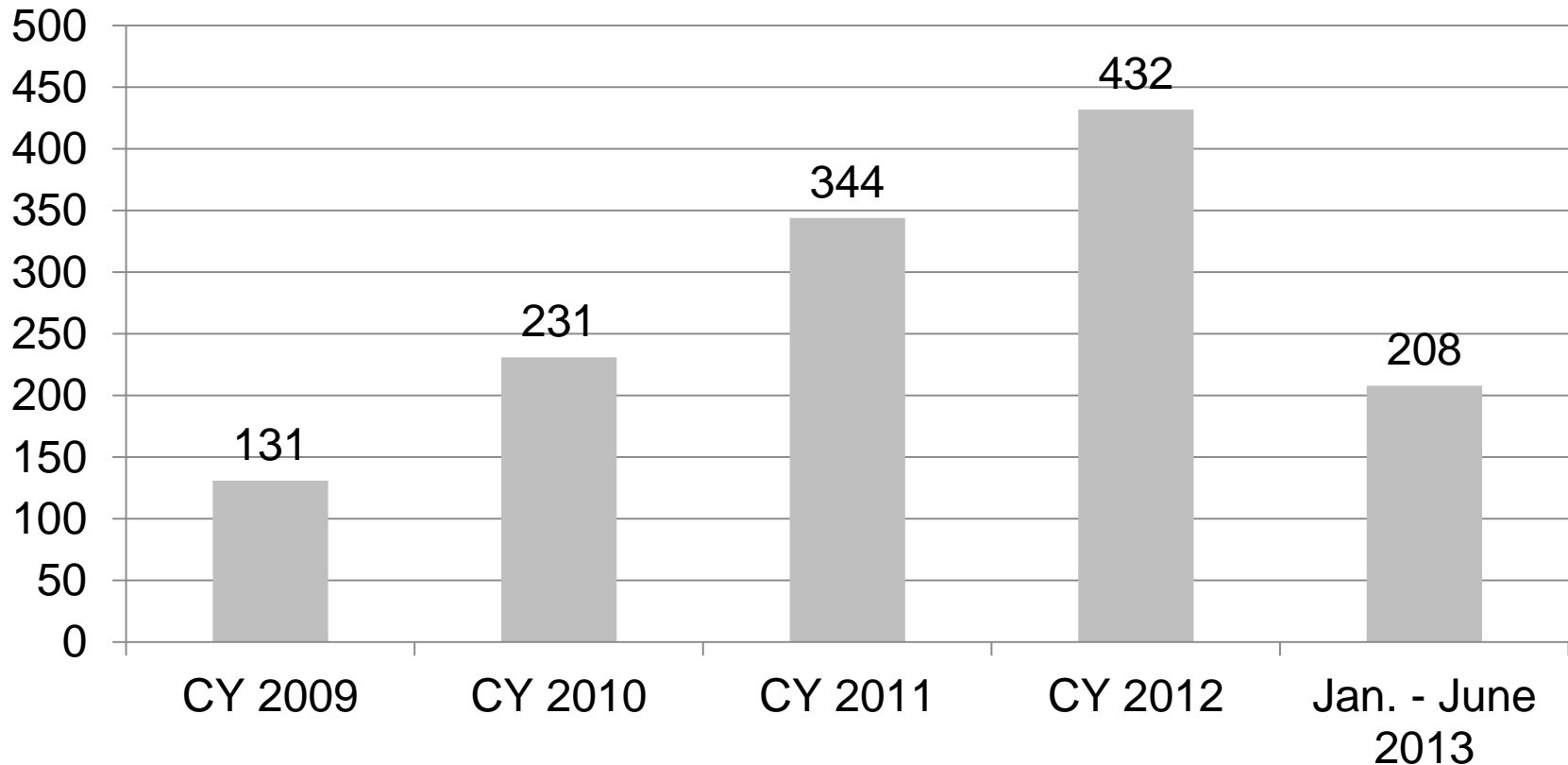
CCT Overview

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- CA receives special federal grant funding to implement a Money Follows the Person (MFP) Rebalancing Demonstration, known in the state as “California Community Transitions” (CCT).
- The primary goal of CCT is to reduce the number of Medi-Cal recipients receiving long-term care (≥ 90 days) in inpatient facilities by arranging for the use of home and community-based (HCB) services.
- Local care coordination organizations work directly with willing and eligible individuals to transition them back home or to the community.
- CCT Project services are available through Sept. 30, 2016.

Total Number of CCT Transitions by CY

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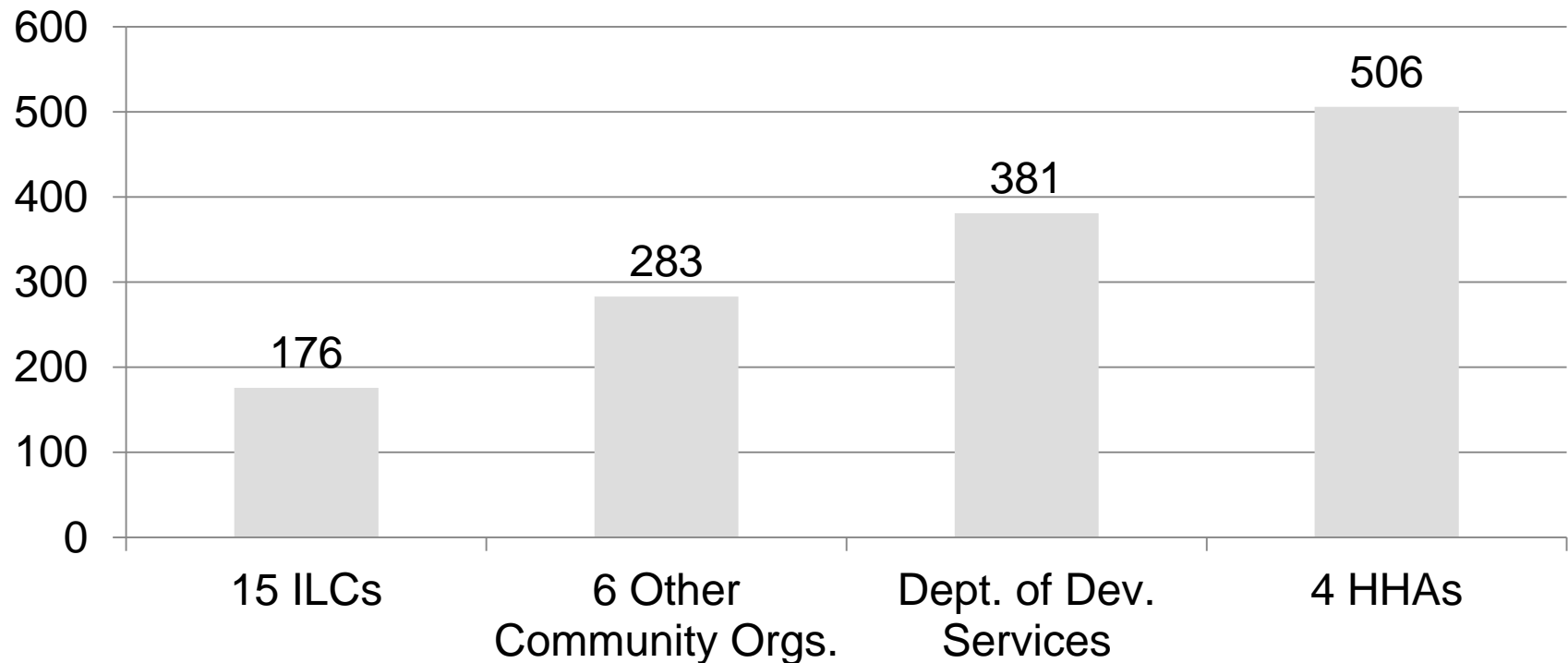


Annual transitions are projected to increase as existing providers gain more experience and new providers are engaged.

CCT Transitions by Provider Type

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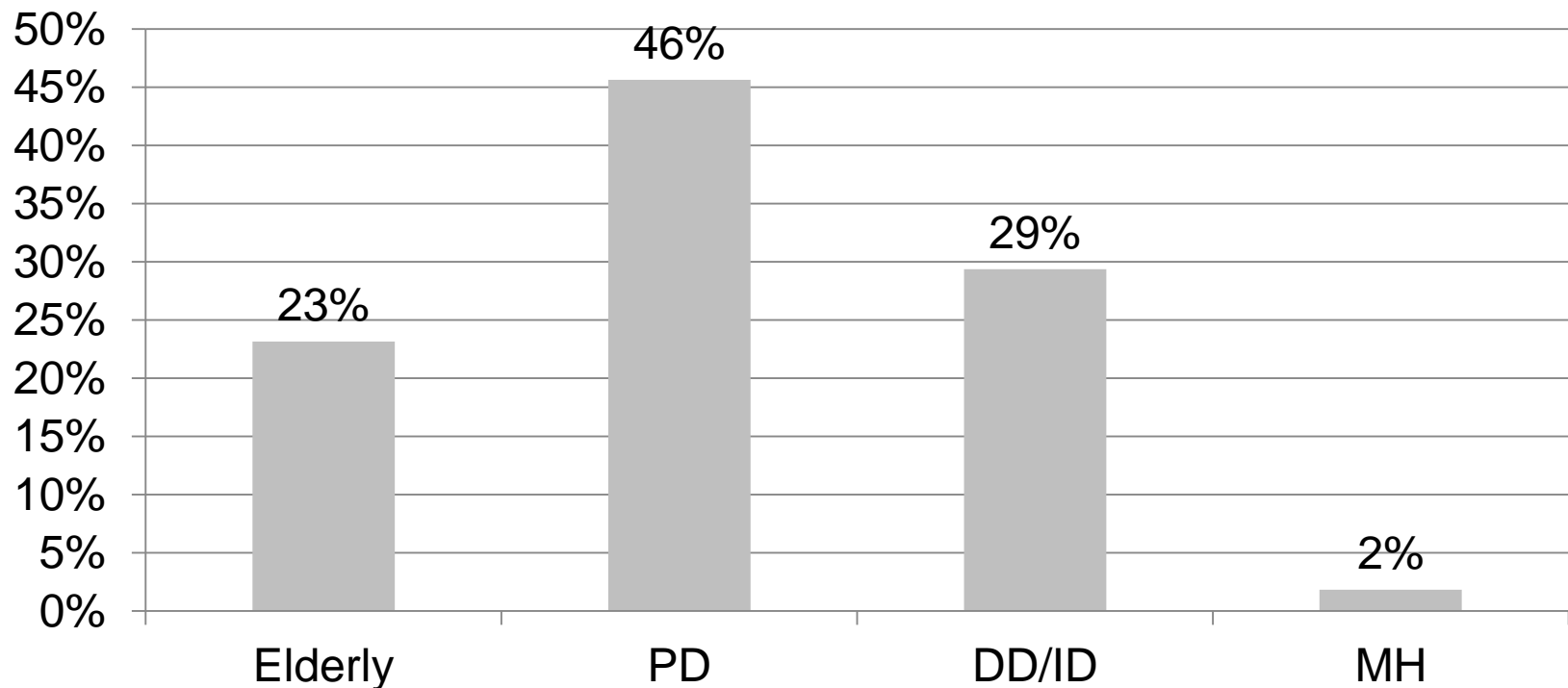
Through June 2013



“Other Community Organizations” include multi-service organizations, such as SCAN, IOA, and Rehabilitation Services of Northern CA.

CCT Participants by Target Population to Date

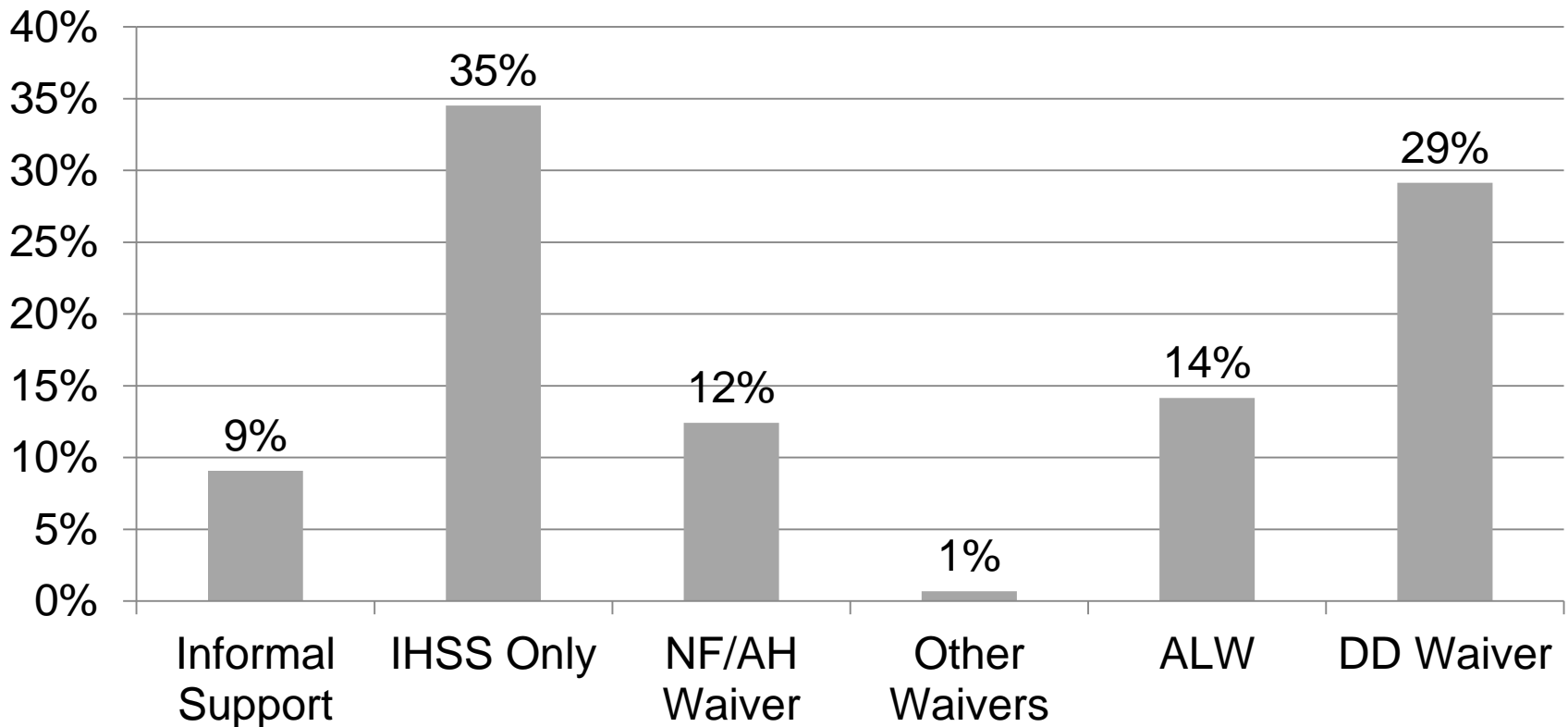
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Although Elderly individuals constitute 82% of CA's nursing facility population, the majority of CCT transitions have been individuals with physical or developmental disabilities. Transitioning Elderly individuals is often challenging because they tend to require more medical care, supervision, and HCBS LTSS.

CCT Post-Transition HCBS

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Other Waivers = AIDS, MSSP, Specialty MH Consolidation Program (SMHCP)

Housing Outcomes by Target Population

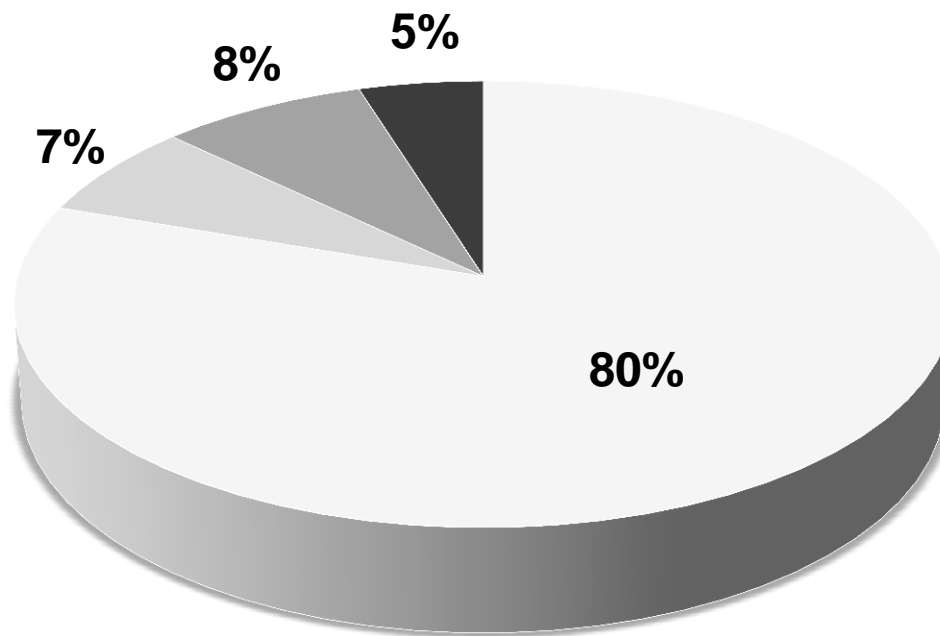
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Target Population	Home	Apartment	ALW	Group Home
Elderly	25%	37%	36%	2%
PD	22%	65%	12%	1%
MH	43%	38%	19%	0%
DD/ID	6%	9%	2%	83%
All 4 Target Populations	18%	42%	15%	25%

DD/ID transitions rely on group homes; whereas, Elderly, Physically Disabled, and Mental Health transitions return home or live in apartments.

1-year CCT Post-transition Status

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- 80% Successfully remained in community for 365-days
- 7% Died during the 365-days
- 8% Re-institutionalized
- 5% Other (i.e., no longer Medi-Cal eligible, moved out of state, etc.)

Post-transition HCBS Cost

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The average cost of post-transition services varies by target population with a low of \$18,000 and a high of \$101,000. The average annual cost for post-transition HCBS services for the entire CCT population is \$48,222* per beneficiary, which is approximately 80% of the annual cost of care in a long-term nursing facility.

* This amount is an average of the cost for all participants who completed 365 days between Jan. 1, 2012 – Dec. 31, 2012.

Post-Transition Enhanced Federal Match

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Cumulative Totals through CY 2012*	
Total Post-Transition Costs	\$28,073,097
Enhanced FMAP = 25% of the Total Post-Transition Costs	\$6,342,011

* For HCBS incurred in the 365 days after transition.

Federal match funding is increased from 50% to 75% (for state plan and waiver services) for 365 days after the date of transition.

The 25% enhanced funding is used to improve the State's rebalancing efforts.

CCT Rebalancing Initiatives

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- CA uses the enhanced FMAP funding to transition individuals from inpatient facilities to the community who would not otherwise qualify for CCT services because they do not meet the length of stay eligibility requirement.
- Rebalancing funds are also being used to assist in funding community services for regional center consumers transitioning from health facilities including all state-operated Developmental Centers.
- And, the enhanced funding will be utilized to support the In Home Supportive Services Program (IHSS). Focusing on the need to expedite IHSS assessments for NF discharges.

MDS 3.0, Section Q Data

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- Current Challenges
 - Untimely
 - No validation of payer-source
 - Substantial level of error and missing data
 - No funding for implementation, training, or oversight
- How it can be used
 - Identification of potential CCT participants, if there is sufficient and sustainable training of nursing facility personnel

811 Grant Update

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Section 811 Project Rental Assistance Demonstration Program

- CA submitted the PRA 811 Grant application as a collaboration between CalHFA, TCAC, HCD, and DHCS
- 335 units of housing, built with tax credits, which are now made affordable to Medi-Cal beneficiaries
- Eligible individuals are Medi-Cal beneficiaries with disabilities, between 18-61 years old, who want to leave an institutional setting and return to community living

Cooperative Agreement Negotiations with HUD

- CA is the first of the 13 states awarded to begin negotiations with HUD
- Final documents are anticipated by the end of Aug. 2013
- In March 2013, there were 2 statewide conference calls with stakeholders; the PRA 811 Team is working to incorporate input from the group in the final Cooperative Agreement

811 Grant Update

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NOFA and Application to be released Mid-September 2013

- The PRA 811 Team meets regularly and has created a draft NOFA, Application, and Developer/CCT Provider Agreement - the final draft will be submitted for legal review after HUD signs the Cooperative Agreement

HCD and DHCS will hold NOFA workshops this Fall

- Regional workshops will be held to discuss the application process and provide Technical Assistance to CCT Providers and Housing Sponsors

Non-Profit Housing (NPH) Association of Northern California's 34th Annual Housing Conference

- The PRA 811 Team has submitted an application to present information about the 811 grant at the Sept. 30, 2013 conference

The first housing units are expected to become available early-2014

Improving CCT

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- Establishing CCT Stakeholder and Consumer Advisory Group
- Identifying potential CCT eligible candidates through DHCS nursing facility authorization process and improving the use of MDS, Section Q
- Improving CCT provider performance and accountability
- Involving CCT providers in the Coordinated Care Initiative